Remarks

The specification has been amended to correct apparent errors where the correction is obvious.

A version with markings to show changes made is attached.

Respectfully submitted,

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Case: Duke File 1661 CIP

Date: January 9, 2002

VERSION WITH MARKINGS TO SHOW CHANGES MADE

IN THE SPECIFICATION:

The paragraph beginning at page 3, line 2 has been amended as follows:

This invention relies on the conception that for lung disorders associated with depletion of the S-nitrosoglutathione (GSNO) pool in lung or depletion of the glutathione pool in lung or increased production of reactive oxygen species in lung, treatment with inhaled gases to replete or increase the S-nitrosoglutathione pool and/or to react preferentially with glutathione to form other NO glutathione derivatives independently of reaction with oxygen, would provide the benefits of treatment using gas inhalation of matching ventilation to perfusion and suitability for administration by an anesthesiologist and the benefits of treatment using inhaled NO of hypoxemia relieving effect and/or smooth muscle constriction relieving effect, and additionally would provide antimicrobial effect and anti-inflammatory activity, and these activities would be provided with less toxicities than previous alternative therapies. The totality of the benefits is important, for example, not only in respect to treatment of asthma, for example, which is associated with smooth muscle constriction in lung and can be associated with hypoxemia, and where lung infection can be a secondary problem, but also in respect to cystic fibrosis where airway lining can be impaired to the extent that relaxing of the airway is not therapeutic, but where antimicrobial effect is important to treat infection associated with cystic fibrosis or where increased GSNO or glutathione (GSH) reactive compounds can upregulate the cystic fibrosis transmembrane regulator. In respect to treating cystic fibrosis, inhaled gaseous GSNO repleting or increase

causing agents also function better than inhaled NO because they cause increase in cystic fibrosis transmembrane regulator and inhaled NO does not and/or are less toxic than NO.

The paragraph beginning at page 8, line 20 has been amended as follows:

There is overlap for the treating agents for administration as a gas for the method herein with the treating agents of 09/390,215 which are compounds capable of being administered as a gas, having an NO group and having a hypoxemia relieving and smooth muscle <u>constriction</u> relieving effect with said NO group being bound in said compound so it does not form NO_2 or NO_x in the presence of oxygen or reactive oxygen species at body temperature where NO_x is NO, N_2O_3, N_2O_4, $OONO^-$, OONO• and any products of their interaction with NO or NO_2.